MANAGEMENT OF AMAVAT [RHEUMATOID ARTHRITIS] THROUGH BALUKA SWEDANA AND KALA BASTI - A SINGLE CASE STUDY

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ABSTRACT
Rheumatoid arthritis is a chronic inflammatory disease of joints characterized by symmetrical replacing ankylosing polyarthritis affecting mainly the peripheral small joints associated with varied constitutional symptoms and serological evidence of auto-reactivity. In ayurveda it is correlated with amavat. In amavat, ama doshais being directed into joints by the vitiated vata dosha and affect the sheshma dhara kala resulting in effusion and swelling of joints. The symptoms are produced due to the vitiation of vata along with the formation of Ama. Ayurveda acharaya Madhavakara in his book Madhav Nidana described the features of Amavat for the first time whereas the treatment of Amavat was first explained by Acharaya Cakradatta.

KEYWORDS: Amavat, Rheumotoid arthritis, ankloysing polyarthritis.

INTRODUCTION
Amavat is a chronic disorder that has both skeleton and extra skeletal manifestation. The chief pathogenic constituents are Ama and vata which simultaneously affect the joints and causes stiffness of the body. Amavat is one such kind of a condition mention in Ayurveda that arises due to the constant use of incompatible combition of food articles and regimens. Acharya Madvakara has given a delaited description regarding the Nidana, Samprapti and...
clinical features of Amavat. The symptoms are produced due to the vitiation of vata along with the formation of Ama. The Ama is carried by the aggravated vata and deposited in Sleshmasthans producing features like Angamarda, aruchi Alasya, sandhiruk and sandhisospha etc. In modern Amavat is corelated with rheumotoid arthritis. The treatment principles of Amavat inculdes removing Ama through Srotoshodhana by procedures like Langhana, Swedana, Agnivardhana by adopting deepana drugs and basti karma, Saindhavadi Anuvasana basti. Hence this study inculdes Ruksha swedana, janu basti, matra basti and Vaitarana basti along with Brihatsaindhavadi tail Anuvasana to anage the Amavat effectively.

Present Complaints
42 yr old female patient got admitted in panchkarma department of dr sarvpalli radhakarshana rajasthan ayurvedic university jodhpur. with complaint of pain in multiple joints since 4yr and swelling of several joints specially wrist, ankle, knee and feet since 2yr and constipation since 1 yr along with morning stiffness. 1 week after the onset of disease she suffered from fever with edema and pain in the joints; the rt elbow, rt and lt knee, wrist joints, rt and lt shoulder joints. She took allopathy treatment but did not get relief so she came in hospital for ayurvedic treatment.

Present History
- **Opd**-8671
- **IPD no**- 326
- **Name** Ladu devi
- **Sex**-Female
- **Occupation**-housewife
- **Bladder**-d/n- 3-4 times, colour-pale, odour-normal
- **Blood pressure** - 110/70 mmof hg
- **Age**- 42 yr
- **Pulse rate** - 76/minute
- **Respiratory rate** -17 min
- **Appetite** - impaired appetite at the onset of the disease
- **Bowel** - constipation
- **Sleep** –Disturbed due to pain

Past History
She did not have history of DM/HTN/TB and any major surgical procedure and no history of any trauma.

General Examination
- Pallor- Absent Clubbing-Absent
- Tongue-uncoated. Icterus –Absent
- Body build- normal Cyanosis- Absent
- Lymphadenopathy-absent
- Edema-bilateral, non pitting tenderness present
- Consciousness-Conscious.

**Investigations-Crp-positive**
Positive
RA factor-positive
CBC-normal
ESR- 69mm1st hr
Uric acid-3.3 mg %

**Dasha Vihad Pariksha**
1. Prakrit - vata pitta
2. Vikriti- Dosha-vatapradhana tridosha, Dooshaya-Rasa
3. Satva - Madhyam
4. Sara - Asthi
5. Sanhanana - Madhyam samhata
6. Pramana - Madhyam
7. Satmaya - Madhyam
8. Ahara shakti - Abyavarana shakti
9. Vyayamashakti - Madhyam
10. Vayah - Madhyam

**Astvidha Pariksha**
1. **Nadi** -Vata -kaphja (74/min) 2. **Mala** - Baddha
3. **Mutra** –Bahumutrata 4. **Jihva** -Malavaritta
5. **Shabda** –Kshin (low tone of speech) 6. **Sparsha**-Ruksha (dry, rough)
7. **Drik** -Samanya 8. **Akrti** -Madhyama

**Locomotory Examination**
- Gati [ range of movements]
Left shoulder joints- abduction, adduction, rotation and elevation- limited due to edema and pain
Left wrist joint- flexion; extension and rotation -limited due to edema and pain
- Sandhi sputana [joint crepitus]-present in both knee joints
- Sparsha asahyata [joint tenderness]-present in affected joints
- Sandhi shota [joint swelling]-present in affected joints
- Rakta varnata [redness]-present in affected joints
- Ushnata [heat]-present in affected joints
- Mamsa kshaya / shosha [muscle wasting]-NAD

Gals
- Gait-slow and painful gait
- Arms- difficulty in pronation and supination [painful] in lt wrist joint power grip-reduced [difficulty in holding]
- Legs- sandhi sputana both knee joints shota in both knee
- Spine
  Thoracic spine - internal rotation and External rotation normal
  Lumber spine - flexion normal
  Extension - normal
  Lateral blending -normal
  Cervical spine - rotation normal flexion, extension and lateral blending normal

1. JOINTS
- Inspection
  Swelling -present
  Redness -present
  Deformities –NAD
- Palpation -Tenderness and warmth Stiffness of the joints

2. CARDIOVASCULAR SYSTEM –s1 s2 clear, no thrills or murmurs
3. RESPIRATORY SYSTEM -no added sounds
4. GIT - P/A-no tenderness no organomegaly
5. CNS - Higher functions-NAD
  Sensory functions- NAD
  Cranial nerves-NAD
  Motor functions-NAD
Panchkarma Treatment

1- Baluca sweda- for 16 days and 45 min every day
2- Janu basti – Dhasmool taila for 16 days and 45 min every day
3- Matra basti-dasmool taila +sheerbala tail
4- kala basti - Anuvasan - sandhwaadi tail
Niruhabasti - Vaitarana basti

Table (1): Ingredients for Vaitarana Basti.

<table>
<thead>
<tr>
<th>Dravya</th>
<th>Matra</th>
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</thead>
<tbody>
<tr>
<td>Saidhava lavana</td>
<td>1 Karsha[12 gms]</td>
</tr>
<tr>
<td>Guda</td>
<td>1/2 pala[24 gms]</td>
</tr>
<tr>
<td>Tila tail</td>
<td>Eeshat[ 60- 70 ml]</td>
</tr>
<tr>
<td>Amleeka</td>
<td>1 pala[48 gms]</td>
</tr>
<tr>
<td>Gomutra</td>
<td>1 kudava[192gms]</td>
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</tbody>
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Table (2): Kala Basti Shedule.

<table>
<thead>
<tr>
<th></th>
<th>1st day</th>
<th>2nd day</th>
<th>3rd day</th>
<th>4th day</th>
<th>5th day</th>
<th>6th day</th>
<th>7th day</th>
<th>8th day</th>
<th>9th day</th>
<th>10th day</th>
<th>11th day</th>
<th>12th day</th>
<th>13th day</th>
<th>14th day</th>
<th>15th day</th>
<th>16th day</th>
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<tbody>
<tr>
<td>Anuasana basti</td>
<td>Anuasana basti</td>
<td>Vaitarana basti</td>
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<td>13 day</td>
<td>14 day</td>
<td>15 day</td>
<td>16 day</td>
<td></td>
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</tbody>
</table>

TOTAL 16 BASTI- 10 ANUASANA+ 6 Vaitarana basti

RESULT

During the treatment course expressed gradual relief her complaints. Symptoms of pain and tenderness in joints and joint swelling within 16 days. Before starting the treatment patient was presented with all the symptoms but there was improvement in stiffness, swelling, pain etc. The subjective parameter show improvement in clinical symptoms. Patient shows RA test negative, CRP negative and changes in ESR value.

Table (3): Showing Signs and Symptoms [Subjective Parameter].

<table>
<thead>
<tr>
<th>Sr no</th>
<th>symptoms</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>sandhishothe</td>
<td>Severe</td>
<td>moderate</td>
</tr>
<tr>
<td>2</td>
<td>Morning stiffness</td>
<td>More than 1 hr</td>
<td>50 mins</td>
</tr>
<tr>
<td>3</td>
<td>Ushnata</td>
<td>severe</td>
<td>moderate</td>
</tr>
<tr>
<td>4</td>
<td>Tenderness</td>
<td>severe</td>
<td>moderate</td>
</tr>
</tbody>
</table>
Table 4: Objective Parameter.

<table>
<thead>
<tr>
<th>Sr no</th>
<th>Test</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CRP</td>
<td>positive</td>
<td>negative</td>
</tr>
<tr>
<td>2</td>
<td>ESR value</td>
<td>69 mm 1st hr</td>
<td>50 mm 1st hr</td>
</tr>
<tr>
<td>3</td>
<td>RA factor</td>
<td>positive</td>
<td>negative</td>
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**DISCUSSION**

Amavat is a santarpanjannya roga. In this case patient was in acute condition. Shula and shotha are the major symptoms. So rukahana swedana [baluka swedana] was applied. It helps in pacifying vitiated vata dosha thus leads to relief in pain and stiffness. Basti plays a prime role in treatment of vitiated vata. Vata is only responsible for all the functions of the body and also for the production of the disease. The given basti enters the Pakvasya, which is the main seat of vata dosha and destroy the vitaited vata dosha, which is the orginator of the disease.

**CONCLUSION**

Rheumotoid arthritis diseases can be clinically compared with Amavat described in ayurvedic classics. The treatment given Baluka swedana 7 day, janubasti 5 days, matra basti and yog basti schedule proved to be effective of the treatment in the management of these disease. The main aim of treatment Amavata to improve the quality of life further preventing deformity. Patient was symptomatically improved with tenderness in joints, pain and joint swelling, pain and improved in her sleep.

**REFERENCES**

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